Complete Summary

TITLE

Rehabilitation: percent of applicable inpatients with an initial functional assessment (Functional Independence Measure [FIM]) to assess the need for rehabilitation intervention entered into the Functional Status and Outcomes Database (FSOD).

SOURCE(S)

Office of Quality and Performance (10Q). FY 2005 VHA executive career field network director performance measurement system and JCAHO hospital core measures. Technical manual. Washington (DC): Veterans Health Administration (VHA); 2005 Mar 9. 244 p.

Measure Domain

PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the <u>Measure Validity</u> page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This measure assesses the percent of applicable inpatients with an initial functional assessment (Functional Independence Measure [FIM]) to assess the need for rehabilitation intervention entered into the Functional Status and Outcomes Database (FSOD), segmented by patients with new stroke, new amputation, or newly acquired brain dysfunction.

RATIONALE

Stroke, lower extremity amputations, or newly acquired brain dysfunction impairments, produce significant life changes for the veteran's functional status. Effective rehabilitation intervention represents the opportunity to achieve maximal

benefit for the patient. Increased functional outcomes for patients contribute to patient satisfaction as well as defer potential costly care expenditures. For rehabilitation outcomes of these patient populations to be tracked, they must first be identified and an initial Functional Independence Measure (FIM) assessment performed.

PRIMARY CLINICAL COMPONENT

Rehabilitation; stroke; lower extremity amputation; brain dysfunction impairment; functional independence assessment

DENOMINATOR DESCRIPTION

Inpatients with a new stroke, lower extremity amputation, or recently acquired brain dysfunction impairment (see the related "Denominator Inclusions/Exclusions" field in the Complete Summary)

NUMERATOR DESCRIPTION

The number of patients from the denominator with an admission initial Functional Independence Measure (FIM) assessment entered into the Functional Status and Outcomes Database (FSOD)

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

 One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Use of this measure to improve performance Variation in quality for the performance measured

EVIDENCE SUPPORTING NEED FOR THE MEASURE

Office of Quality and Performance (10Q). FY 2005 VHA executive career field network director performance measurement system and JCAHO hospital core measures. Technical manual. Washington (DC): Veterans Health Administration (VHA); 2005 Mar 9. 244 p.

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

External oversight/Veterans Health Administration Internal quality improvement

Application of Measure in its Current Use

CARE SETTING

Hospitals

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

TARGET POPULATION AGE

Unspecified

TARGET POPULATION GENDER

Fither male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

Unspecified

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Unspecified

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Getting Better Living with Illness

IOM DOMAIN

Effectiveness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

Inpatients with a new stroke, lower extremity amputation, or recently acquired brain dysfunction impairment

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

Inpatients with a new stroke, lower extremity amputation, or recently acquired brain dysfunction impairment*

- If the admission and/or discharge diagnosis is 430.xx, 431.xx, 432.xx, 434.xx, 436.xx, 433.01, 433.11, 433.21, 433.31, 433.81, 433.91, or 997.02, OR
- If the admission and/or discharge diagnosis is V57.xx (Rehabilitation) and any secondary diagnosis is 342.xx (hemiparesis), 430.xx, 431.xx, 432.xx, 433.xx, 434.xx, 435.xx, 436.xx, 437.xx, 438.xx, or 997.02, OR
- If the admission and/or discharge diagnosis is 433.xx or 435.xx and any secondary diagnosis code is 342.xx, 430.xx, 431.xx, 432.xx, 434.xx, 436.xx, or 997.02.

New Lower Extremity Amputation: Any ICD-9 inpatient or ambulatory surgical procedure code of 84.10, 84.13 - 84.19.

^{*}Note:

[&]quot;New" Stroke: Inpatient International Classification of Diseases, Ninth Revision (ICD-9) codes:

Newly Acquired Brain Dysfunction: The following ICD-9 codes represent the traumatic brain injury patients: 310.2, 348.1, 800.xx, 801.xx, 803.xx, 804.xx, 850.3, 850.4, 851.xx, 852.xx, 853.xx, 854.xx, 905.0, and 907.0.

Exclusions

Patients with any of the following:

- Discharged against medical advice (AMA)
- Died
- Discharged from a Community Contract Nursing Home program paid by the Veterans Administration (VA)
- Length of inpatient stay is less than 3 days, calculated as inpatient discharge date minus inpatient admission date at the facility, regardless of bedsection
- Discharged from a VA Blind Rehabilitation Center

DENOMINATOR (INDEX) EVENT

Clinical Condition Institutionalization

DENOMINATOR TIME WINDOW

Time window follows index event

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

The number of patients from the denominator with an admission initial Functional Independence Measure (FIM) assessment entered into the Functional Status and Outcomes Database (FSOD)*

*FSOD: The Functional Status and Outcomes Database for Rehabilitation offers rehabilitation clinicians and managers the ability to track outcomes through the full continuum of rehabilitative care.

Exclusions Unspecified

NUMERATOR TIME WINDOW

Episode of care

DATA SOURCE

Administrative and medical records data

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Analysis by subgroup (stratification on patient factors, geographic factors, etc.)

DESCRIPTION OF ALLOWANCE FOR PATIENT FACTORS

Data are segmented by patients with new stroke, new amputation, or newly acquired brain dysfunction.

STANDARD OF COMPARISON

Internal time comparison Prescriptive standard

PRESCRIPTIVE STANDARD

Fiscal Year (FY) 2005 targets for Rehabilitation:

Meets Target: 76%Exceeds Target: 80%

EVIDENCE FOR PRESCRIPTIVE STANDARD

Office of Quality and Performance (10Q). FY 2005 VHA executive career field network director performance measurement system and JCAHO hospital core measures. Technical manual. Washington (DC): Veterans Health Administration (VHA); 2005 Mar 9. 244 p.

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Unspecified

Identifying Information

ORIGINAL TITLE

Rehabilitation.

MEASURE COLLECTION

<u>Fiscal Year (FY) 2005: Veterans Health Administration (VHA) Performance</u> Measurement System

DEVELOPER

Veterans Health Administration

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2002 Nov

REVISION DATE

2005 Mar

MEASURE STATUS

Please note: This measure has been updated. The National Quality Measures Clearinghouse is working to update this summary.

SOURCE(S)

Office of Quality and Performance (10Q). FY 2005 VHA executive career field network director performance measurement system and JCAHO hospital core measures. Technical manual. Washington (DC): Veterans Health Administration (VHA); 2005 Mar 9. 244 p.

MEASURE AVAILABILITY

The individual measure, "Rehabilitation," is published in "FY 2005 VHA Performance Measurement System: Technical Manual."

For more information contact:

Department of Veterans Affairs
Office of Quality and Performance (10Q)

ATTN: Bonny Collins, E-mail: bonny.collins@va.gov or

Lynnette Nilan, E-mail: lynnette.nilan@va.gov

NQMC STATUS

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